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# EXHIBITOR REGISTRATION FORM

2010 NFPC PRIEST CONFERENCE & HOUSE OF DELEGATES

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Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please list the names of the persons who will be staffing your table. (Please note, the maximum number of exhibitors is 2 per table)

1.) \_\_\_\_\_

2.) \_\_\_\_\_

[  ] One Exhibit Booth @ \$500.00 each \_\_\_\_\_

[  ] One Exhibit Booth @ \$250 each (**non-profit organization only**) \_\_\_\_\_

[  ] Thursday Evening Banquet Reservations @\$60.00 ea. \_\_\_\_\_

**Total Amount Due:** \_\_\_\_\_

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## PAYMENT

[  ] Check or money order enclosed. (Please make checks payable to the NFPC)

**OR**

[  ] Please bill my credit card (All faxed registrations)  Visa  MasterCard  American Express

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

Please return to:

**NFPC**  
333 N. Michigan Ave. • Suite 1205  
Chicago, IL 60601-4001  
(312) 442-9700 • (312) 442-9709 (fax)  
nfpc@nfpc.org (e-mail) • www.nfpc.org (website)

**REGISTRATION DEADLINE: FRIDAY, MARCH 19 2010**  
**A CONFIRMATION PACKET WILL BE SENT UPON RECEIPT OF THIS FORM.**